



SEP 21 2015

VOTER REGISTRATION  
ELECTORAL BOARD

# Statement of Organization CANDIDATE COMMITTEE

\*Please read instructions before completing this form.

Type of Statement				
<input type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.		<input checked="" type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization.		
		Date Changes Took Effect	SBE-issued Committee ID	
		09/21/2015	CC-15-00585	
Committee Information				
Committee Information	Friends of Phil Cefaratti			
	Name of Candidate Campaign Committee			
	3812 Griffith PI			
	Street Address/PO Box		Suite #	
	Alexandria		VA	22304
	City		State	Zip Code
philcefaratti2015@gmail.com		7033717601		
Email Address		Daytime Phone #		
www.philcefaratti.com				
Campaign Website				
Candidate Information				
Candidate Information	Cefaratti	Dominic	Philip	
	Salutation	Last Name	First Name	Middle Name
	3812 Griffith PI		Suffix	
	Residence Address		Apt #	
	Alexandria		VA	22304
	City		State	Zip Code
	ALEXANDRIA CITY		917225558	
	County or City of Residence		Voter Identification #	
philcefaratti2015@gmail.com		7033717601		
Email Address		Daytime Phone #		
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.				
Election Information				
Election Information	Member City Council		Alexandria City	
	Office Sought		District (if one)	
	Independent	2015	<input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special	
	Political Party		Year of Election	Type of Election



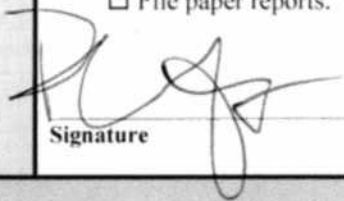
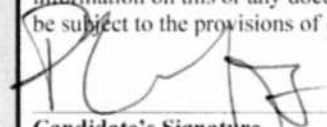
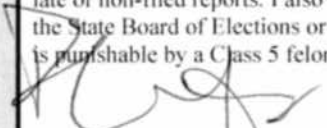
## Statement of Organization CANDIDATE COMMITTEE

Treasurer Information					
<b>Treasurer Information</b>	<b>Cefaratti</b>		<b>Dominic Philip</b>		
	Salutation	Last Name	First Name	Middle Name	Suffix
	<b>3812 Griffith Pl</b>				
	Residence Address			Apt #	
	<b>Alexandria</b>			<b>VA</b>	<b>22304</b>
	City			State	Zip Code
	<b>ALEXANDRIA CITY</b>			<b>917225558</b>	
	County or City of Residence			Voter Identification #	
<b>philcefaratti2015@gmail.com</b>			<b>7033717601</b>		
Email Address			Daytime Phone #		
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Campaign Depository					
<b>PNC</b>					
Name of Primary Financial Institution			Name of Other Financial Institution (if applicable)		
<b>Alexandria VA</b>					
City		State	City		
			State		
Committee Activity					
<b>Dates of Activity</b>	Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")				
	Date first contribution accepted: _____				
	Date first expenditure made: _____				
	Date campaign depository designated: _____				
	Date filing fee paid for party nomination: _____				
	Date Statement of Qualification filed: <b>05/20/2015</b>				
	Date treasurer appointed: <b>05/19/2015</b>				

(continued on next page)



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Filing Method	
<b>Filing Method</b>	<p>Please indicate the method by which this committee will submit all required campaign finance reports:</p> <p><input checked="" type="checkbox"/> File electronically using <b>SBE's Electronic Filing Application</b>.</p> <p><input type="checkbox"/> File electronically using an <b>SBE Approved Vendor</b> (Please indicate Name of Vendor: _____)</p> <p><input type="checkbox"/> File paper reports.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">             _____  <b>Signature</b> </div> <div style="width: 45%; text-align: right;"> <div style="font-size: 1.5em; margin-bottom: 5px;">9/21/15</div>           _____  <b>Date</b> </div> </div>
Signatures	
<b>Candidate's Signature</b>	<p>I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the <i>Code of Virginia</i>. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">             _____  <b>Candidate's Signature</b> </div> <div style="width: 45%; text-align: right;"> <div style="font-size: 1.5em; margin-bottom: 5px;">9/21/15</div>           _____  <b>Date</b> </div> </div>
<b>Treasurer's Signature</b>	<p><b>I accept the appointment of Treasurer of this campaign committee.</b> I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the <i>Code of Virginia</i> for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;">             _____  <b>Treasurer's Signature</b> </div> <div style="width: 45%; text-align: right;"> <div style="font-size: 1.5em; margin-bottom: 5px;">9/21/15</div>           _____  <b>Date</b> </div> </div>